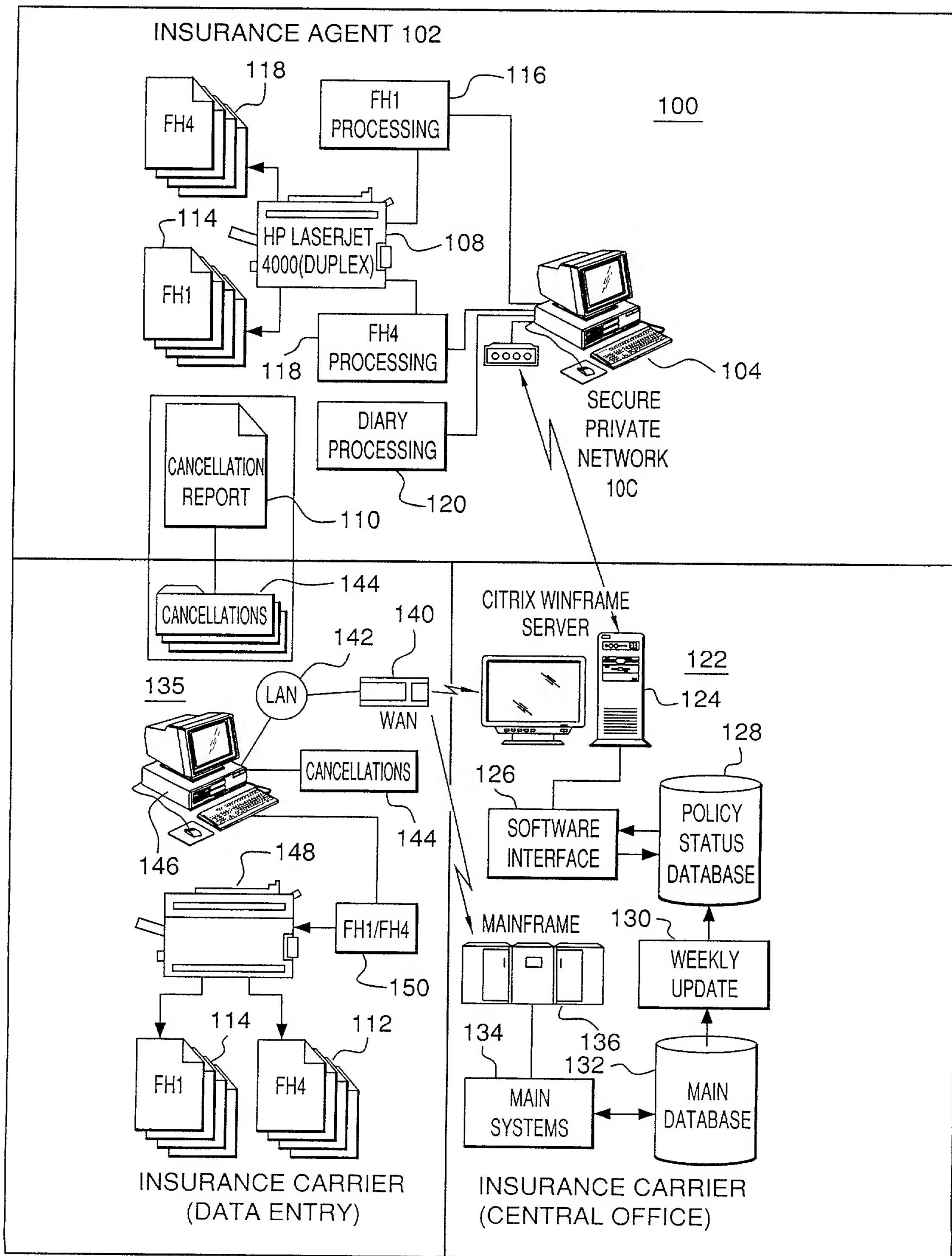




FIG. 1

100



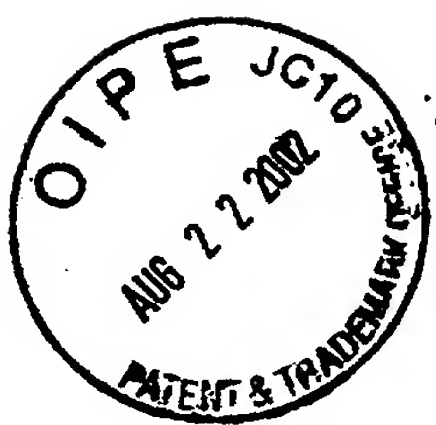
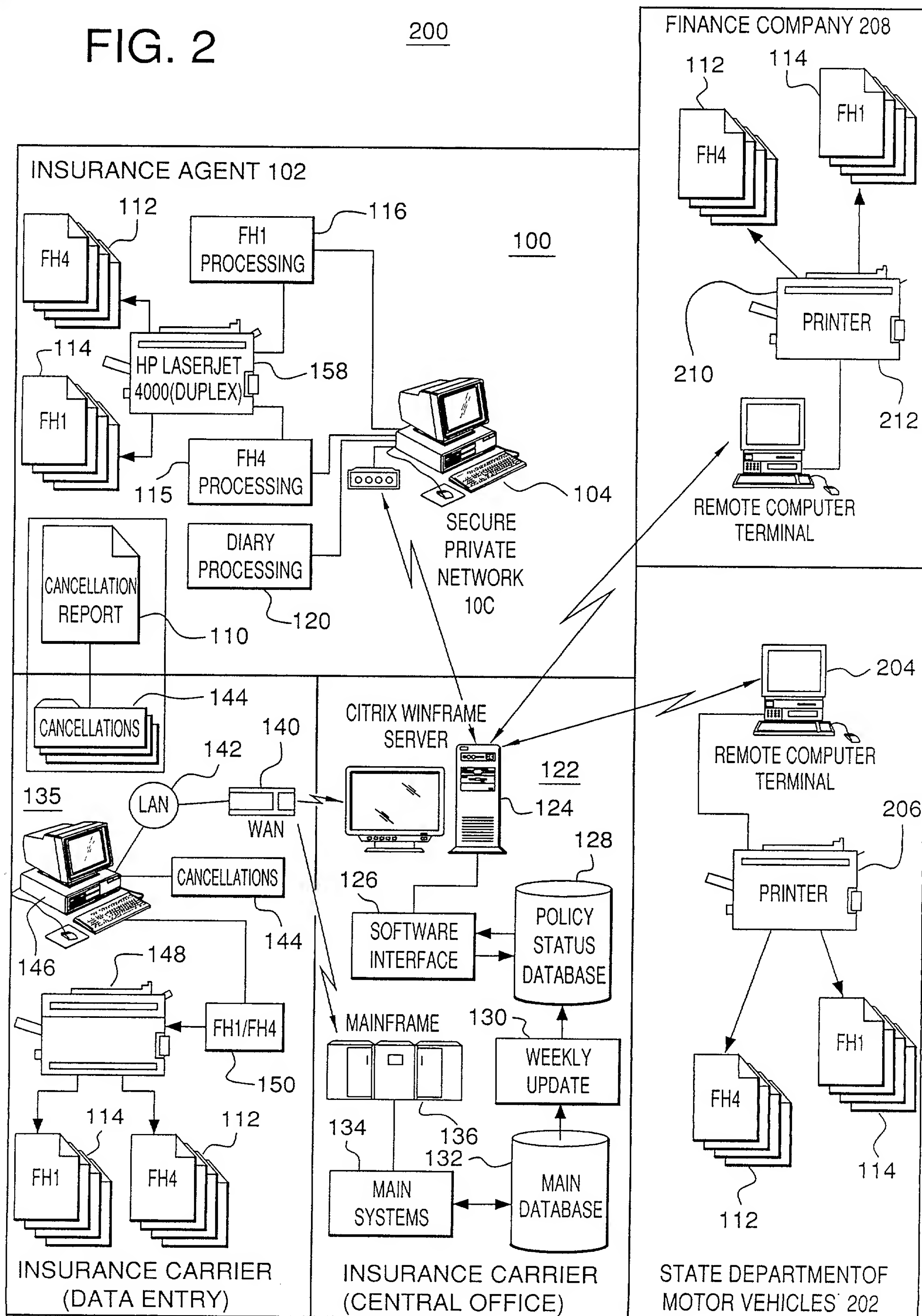
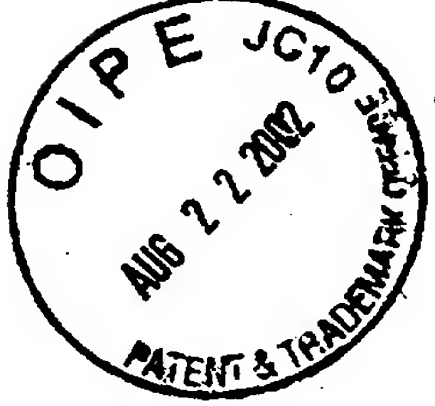


FIG. 2

200





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Thomas J. McWilliams, Esq.
Phone No. (215) 241-7939

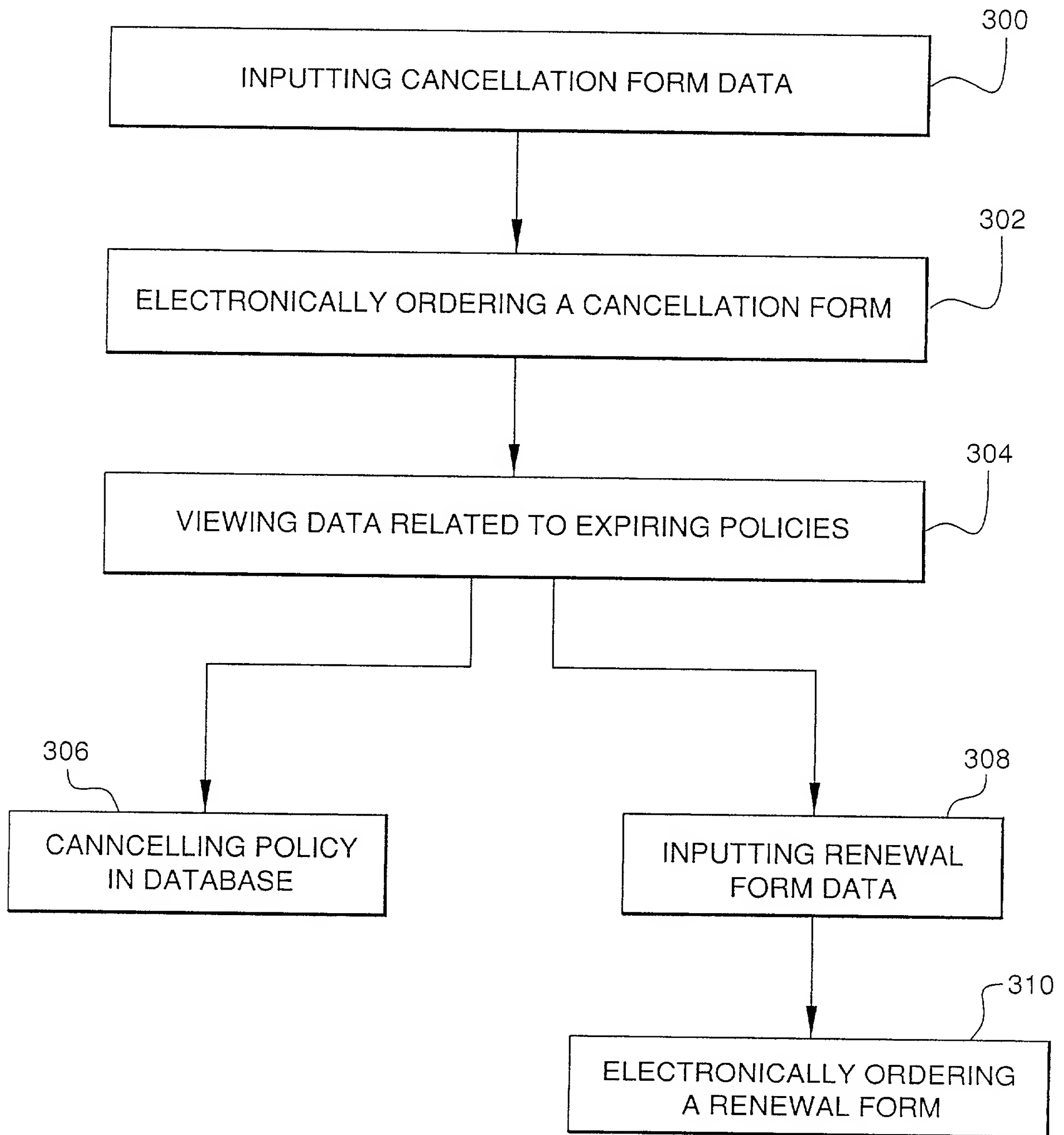


FIG. 3



400

☐ Black Car Dairy

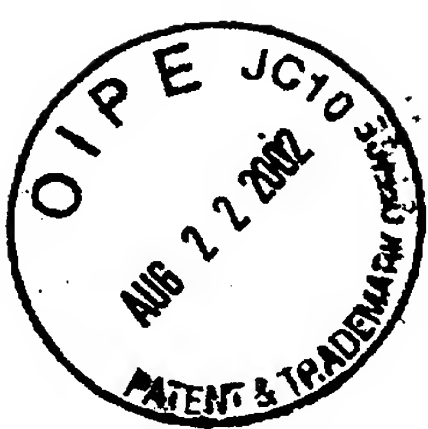
You have 1 policies high require Action today
and 2 policies which are past their cancellation date

402

Start Diary

Don't Start Diary

FIG. 4



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OptionsHelp

500

Select a Policy

Your search returned 768 policies

Policy Number	Insured Name	Effective Date	Expiration Date	Carrier Status	FH Status
CAL388837	John Insured	01/01/1999	02/28/1998	EX	
CAL452228	Jane Insured	11/01/1997	02/28/1998	EX	
CAL452228	Jane Insured	02/28/1998	02/28/1998	AC	FH4
CAL452229	George Covered	11/01/1997	02/28/1998	EX	
CAL452229	George Covered	02/28/1998	02/28/1998	AC	
CAL452230	Tony Driver	11/01/1997	02/28/1998	EX	
CAL452230	Tina Driver	02/28/1998	02/28/1998	AC	

Click any column on the policy you wish to work on

Cancel

FIG. 5



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600

Black Car

FileOptionsHelp

Policy H91111111 effective 2/28/2001

602

Policy Number

H91111111

Effective Date

2/28/2001

Expiration date

2/28/2002

Product Code

N80507

Company Name

Carrier Insurance Company

Policy Source

Office Entry

Carrier Status

Unknown

FH Status

FH 1

Policy History

604

Insured Name and Address

Name:

John Insured

Address: 1

One Liberty place

Address: 2

City

Philadelphia

State

PA

Zip

19103

Empolymnt Information (optional)

Soc. Sec.

Fed. Emp. No.

608

Vehicle Information

Year

1994

Make

LINCOLN

Model

TOWNCAR

VIN/ Serial No.

12345

Seating Capacity

5

Transaction Information

Type

FH 1

FH 4

Reason

To Remain

Effective Date

04/02/2001

610

612

Print FH

Cancel

614

FIG. 6



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Microsoft Access

File Edit View Insert Tools Window Help

Policy Table

Field Name	Data Type	Description
Effective_Date	Date/Time	
Expiration_Date	Date/Time	
Policy_Staus	Text	
Company_Code	Text	
Premium	Number	
Insured_Name	Text	
Insured_Address_1	Text	
Insured_Address_2	Text	
Insured_City	Text	
Insured_State	Text	
Insured_Zip	Text	
Make	Text	
Model	Text	
Vin	Text	
Year	Text	
Policy_Source	Text	Where the policy information was entered
Policy_Update_Date	Date/Time	Date the policy record was updated
FH_Status	Text	FH1 or FH4 - blanks allowed
Producer_Code	Text	Producer code determines whether or not a policy is Black Car or Grey Car

Field Properties

General Lookup

Format	9
Input Mask	
Caption	
Default Value	
Validation Rule	
Validation Text	
Requested	Yes
	No
	No

A field name can be up to 64 charachters long; including spaces Press F1 for help on field names.

Design view F6 - Switch views F1 - Help

700

FIG. 7



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Phone No. (215) 241-7939

FH-4 (9/86)

- ☒ 400 Carrier Fire Underwriters Insurance Company
☐ 487 Carrier Insurance Company
☐ 004 Carrier Property and Casualty Insurance Company

☒ herby gives notice that the insurance certified by the company in its FOR HIRE PASSENGER VEHICLE CERTIFICATE heretofore issued to.

☐ herby gives notice that the bond certified by the company in its FOR HIRE PASSENGER VEHICLE CORPORATE SURETY BOND CERTIFICATE heretofore issued to.

John Insured
One Liberty Place
Philadelphia, PA 19103

applicable with respect to the following Motor Vehicle:

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity
2000	FORD	927H657H8989H7	5

FH-4 (9/86)

- ☒ 400 Carrier Fire Underwriters Insurance Company
☐ 487 Carrier Insurance Company
☐ 004 Carrier Property and Casualty Insurance Company

☒ herby gives notice that the insurance certified by the company in its FOR HIRE PASSENGER VEHICLE CERTIFICATE heretofore issued to.

☐ herby gives notice that the bond certified by the company in its FOR HIRE PASSENGER VEHICLE CORPORATE SURETY BOND CERTIFICATE heretofore issued to.

John Insured
One Liberty Place
Philadelphia, PA 19103

applicable with respect to the following Motor Vehicle.

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity
2000	FORD	927H657H8989H7	5

FH-4 (9/86)

- ☒ 400 Carrier Fire Underwriters Insurance Company
☐ 487 Carrier Insurance Company
☐ 004 Carrier Property and Casualty

State of New York - Department of Motor Vehicles
TERMINATION NOTICE - FOR HIRE PASSENGER VEHICLE

SOCIAL SECURITY OR FEDERAL EMPLOYER'S NO	1	1	1	1	1	1	1	1	1
Individual <input checked="" type="checkbox"/> U.S.A. Soc. Sec. No	Federal <input type="checkbox"/> Employer's Number	Canadian <input type="checkbox"/> Soc. Sec. No. Number							

is TERMINATED

effective 02/20/2001

at midnight

(Cannot be less than 45 days after receipt in Department)

Name and Address of Agency or Office Issuing FH-4

Insurance Agency
1735 Market St
Philadelphia, PA 19103 Agent

By

Signature of Authorized Representative

State of New York - Department of Motor Vehicles
TERMINATION NOTICE - FOR HIRE PASSENGER VEHICLE

SOCIAL SECURITY OR FEDERAL EMPLOYER'S NO	1	1	1	1	1	1	1	1	1
Individual <input checked="" type="checkbox"/> U.S.A. Soc. Sec. No.	Federal <input type="checkbox"/> Employer's Number	Canadian <input type="checkbox"/> Soc. Sec. No. Number							

is TERMINATED

effective 02/20/2001

at midnight

(Cannot be less than 45 days after receipt in Department)

Name and Address of Agency or Office Issuing FH-4

Insurance Agency
1735 Market St
Philadelphia, PA 19103 Agent

By

Signature of Authorized Representative

State of New York - Department of Motor Vehicles
TERMINATION NOTICE - FOR HIRE PASSENGER VEHICLE

FIG. 9



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Inventor: Chapman et al.
Docket No. 99-40112-US-C1
Thomas J. McWilliams, Esq.
Phone No. (215) 241-7939

FH--1 (8/67) State of New York - Department of Motor Vehicles
INSURANCE CERTIFICATE - FOR HIRE PASSENGER VEHICLE

- ☐ 400 Carrier Fire Underwriters Insurance Company
- ☒ 487 Carrier Insurance Company
- ☐ 004 Carrier Property and Casualty

6111

an authorized New York Insurer, certifies that it has issued a policy complying with Section 370 of the Vehicle and Traffic Law to:

John Insured
One Liberty Place
Philadelphia, PA 19103

applicable with respect to the following Motor Vehicle:

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity
2001	PONTIAC	9376H784393F778S	5

not applicable on and after date of this certificate to the following replaced vehicle:

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity

(See instructions on Reverse Side)

SOCIAL SECURITY OR FEDERAL EMPLOYER'S NO.									
Individual	Federal	Canadian							
<input type="checkbox"/> U.S.A.	<input type="checkbox"/> Employer's	<input type="checkbox"/> Soc. Sec. No.							
Soc. Sec. No.	Number	Number							

Explanation: To Register

POLICY
NUMBER H9 00 32 - 71 2

EFFECTIVE
From Midnight 2/28/2001 To Midnight. Feb. 28, 2002

(not applicable to obtain registration plates after 60 days from effective date)

Name and Address of Agency or Office Issuing FH-4
Insurance Agency
1735 Market St
Philadelphia, PA 19103 Agent

Signature of Authorized Representative

(See instructions on Reverse Side)

SOCIAL SECURITY OR FEDERAL EMPLOYER'S NO.									
Individual	Federal	Canadian							
<input type="checkbox"/> U.S.A.	<input type="checkbox"/> Employer's	<input type="checkbox"/> Soc. Sec. No.							
Soc. Sec. No.	Number	Number							

Explanation: To Register

POLICY
NUMBER H9 00 32 - 71 2

EFFECTIVE
From Midnight 2/28/2001 To Midnight. Feb. 28, 2002

(not applicable to obtain registration plates after 60 days from effective date)

Name and Address of Agency or Office Issuing FH-4
Insurance Agency
1735 Market St
Philadelphia, PA 19103 Agent

Signature of Authorized Representative

(See instructions on Reverse Side)

SOCIAL SECURITY OR FEDERAL EMPLOYER'S NO.									
Individual	Federal	Canadian							
<input type="checkbox"/> U.S.A.	<input type="checkbox"/> Employer's	<input type="checkbox"/> Soc. Sec. No.							
Soc. Sec. No.	Number	Number							

FH--1 (8/67) State of New York - Department of Motor Vehicles
INSURANCE CERTIFICATE - FOR HIRE PASSENGER VEHICLE

- ☐ 400 Carrier Fire Underwriters Insurance Company
- ☒ 487 Carrier Insurance Company
- ☐ 004 Carrier Property and Casualty

6111

an authorized New York Insurer, certifies that it has issued a policy complying with Section 370 of the Vehicle and Traffic Law to:

John Insured
One Liberty Place
Philadelphia, PA 19103

applicable with respect to the following Motor Vehicle:

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity
2001	PONTIAC	9376H784393F778S	5

not applicable on and after date of this certificate to the following replaced vehicle:

Year	Make of Vehicle	Identification or Serial No.	Seating Capacity

FIG. 10